CONSOLIDATED EDISON INC

Form 4

Common

Stock

September 04, 2014

FORM 4 INITED STATES SECURITIES AND EVOLANCE COMMISSION								OMB APPROVAL			
Washington, D.C. 20549							OMB Number:	3235-028			
if no lo subject Section Form a Form a obligat may co	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction See Instruction STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								Expires: January 31 Expires: 200 Estimated average burden hours per response 0.		
(Print or Typ	e Responses)										
1. Name and Address of Reporting Person * McAvoy John			2. Issuer Name and Ticker or Trading Symbol CONSOLIDATED EDISON INC [ED]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
C/O SECI	(First) (1 IDATED EDISON RETARY, 4 IRVIN SUITE 1618-S	3. Date of Earliest Transaction (Month/Day/Year) 08/31/2014					Director 10% Owner X Officer (give title Other (specify below) Chairman, President & CEO				
NEW YO	(Street) RK, NY 10003	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acc	quired, Disposed o	f, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	ed Date, if	3.	4. Securitor(A) or Di (Instr. 3,	ies Acquired sposed of (D) 4 and 5) (A) or (D) Price		5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	08/31/2014	09/04/20)14	P	35.25 (1)	A	\$ 56.42	11,875.98	D		
Common Stock								2,005.46	I	By Tax Reduction Act Stock Ownership Plan (TRASOP)	

By THRIFT PLAN

815.64

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9
Derivativ	e Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Date		Amou	nt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						J
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date Exercisable	Expiration Date	Title			
				Code V	(A) (D)						
				Code V	(A) (D)		*	Title	Number of Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

McAvoy John CONSOLIDATED EDISON, INC. C/O SECRETARY 4 IRVING PLACE, SUITE 1618-S NEW YORK, NY 10003

Chairman, President & CEO

Signatures

Carole Sobin; Attorney-in-Fact 09/04/2014

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Purchase of shares of common stock of Consolidated Edison, Inc. (the "Company") under the Company's Stock Purchase Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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